

ISSUE SLIP STAPLE AREA (for additional cross references)

Vonda M. West
Paralegal Specialist

7/28/10

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	41	75	7/17
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date									
Final	4	2	5	8	12	3				
Original	25	13	27	15	24					
	62	03	03	03	03	04				
1	✓	✓	✓	✓	✓	✓				
2	✓	✓	✓	✓	✓	✓				
3	✓	✓	✓	✓	✓	✓				
4	✓	✓	✓	✓	✓	✓				
5	✓	✓	✓	✓	✓	✓				
6	✓	✓	✓	✓	✓	✓				
7	✓	✓	✓	✓	✓	✓				
8	✓	✓	✓	✓	✓	✓				
9	✓	✓	✓	✓	✓	✓				
10	✓	✓	✓	✓	✓	✓				
11	✓	✓	✓	✓	✓	✓				
12	✓	✓	✓	✓	✓	✓				
13	✓	✓	✓	✓	✓	✓				
14	✓	✓	✓	✓	✓	✓				
15	✓	✓	✓	✓	✓	✓				
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Claim	Date									
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Claim	Date									
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If more than 150 claims or 10 actions
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